

<p style="text-align: center;"><b>UXBRIDGE PLANNING BOARD</b> <b>FORM C</b> <b>APPLICATION FOR DEFINITIVE PLAN APPROVAL</b></p>
---

Date: \_\_\_\_\_

Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

*To the Planning Board of the Town of Uxbridge:*

The undersigned, being the applicant as defined under chapter 41, § 81-L, for the definitive approval of a proposed subdivision shown on a plan entitled: \_\_\_\_\_

designed by \_\_\_\_\_, dated \_\_\_\_\_

and described as follows: \_\_\_\_\_ located \_\_\_\_\_

Map: \_\_\_\_\_, Parcel: \_\_\_\_\_

number of lots proposed \_\_\_\_\_ lots, total acreage of tract \_\_\_\_\_, hereby submits said plan as a DEFINITIVE subdivision plan in accordance with the Rules and Regulations of the Uxbridge Planning Board and makes application to the Board for Approval of said plan.

The undersigned's title to said land is derived from \_\_\_\_\_  
by deed dated \_\_\_\_\_ and recorded in the \_\_\_\_\_ County District  
Registry of Deeds, Book \_\_\_\_\_, Page \_\_\_\_\_, registered in the \_\_\_\_\_ County  
Registry District of the Land Court, Certificate of Title No. \_\_\_\_\_; and said land is  
free of encumbrances except for the following: \_\_\_\_\_

Said plan has ( ) has not ( ) evolved from a preliminary plan submitted to the Board on  
(date) \_\_\_\_\_, and approved ( ); approved with modifications ( ); disapproved ( )  
filed with the Town Clerk on (date) \_\_\_\_\_.

The undersigned hereby applies for the approval of said DEFINITIVE plan by the Board, in  
belief that the plan conforms to the Board's Rules and Regulations.

Applicant's Name (print): \_\_\_\_\_ Signature: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Applicant's Telephone: \_\_\_\_\_ Date: \_\_\_\_\_

Owner's Name (print): \_\_\_\_\_ Signature: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

Owner's Telephone: \_\_\_\_\_ Date: \_\_\_\_\_

Engineering Firm: \_\_\_\_\_

Engineer's Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Engineer's Address: \_\_\_\_\_

Engineer's Telephone: \_\_\_\_\_ Date: \_\_\_\_\_

Land Surveying Firm: \_\_\_\_\_

Land Surveyor's Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Land Surveyor's Address: \_\_\_\_\_

Land Surveyor's Telephone: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant's Authorization if not the owner: \_\_\_\_\_

Received by the Town Clerk:

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Signature: \_\_\_\_\_

Received by the Board of Health:

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Signature: \_\_\_\_\_

Please Refer To Subdivision Rules And Regulations  
For A Complete List Of Materials To Be Submitted With Application.